Image# 202104059443064679 PAGE 1 / 3

#### FEC FORM 2

#### STATEMENT OF CANDIDACY

1. (	(a) Name of Candidate (in full)						
	Lee, Mike, , ,	□ Cho	ak if addra	a abangad		2. Candidata's EEC Identification Number	
(	(b) Address (number and street) PO Box 1537	□ Che	ck ii addres	ss changed		Candidate's FEC Identification Number     S0UT00165	
(	(c) City, State, and ZIP Code					3. Is This New Amer	ded
	Salt Lake City		UT	8411	0	Statement (N) OR (A)	
4. I	Party Affiliation	5. Office Sought			6. State & Dist	trict of Candidate	
	REPUBLICAN PARTY	Senate			UT	00	
	DE	SIGNATION	OF PRI	NCIPAL	CAMPAIG	N COMMITTEE	
7.	hereby designate the following na	med political comr	mittee as m	y Principal (	Campaign Comr	mittee for the $\frac{2022}{\text{(year of election)}}$ election(s).	
	NOTE: This designation should be	filed with the appro	opriate offic	ce listed in the	ne instructions.		
(	(a) Name of Committee (in full)	Ino					
	Friends of Mike Lee	inc					
(	(b) Address (number and street)						
	PO Box 1537						
(	(c) City, State, and ZIP Code						-
	Salt Lake City				UT	84110-1537	
	DE					COMMITTEES	
		(Inc	luding Join	t Fundraisin	g Representativ	/es)	
		ned committee, wl	hich is NOT	my princip	al campaign cor	mmittee, to receive and expend funds on behalf of	my
(	candidacy.						
ı	NOTE: This designation should be	iled with the princ	ipal campa	ign committe	ee.		
(	(a) Name of Committee (in full)						
	Freedomworks PAC						
	(b) Address (number and street)						
	PO Box 75760						
	(c) City, State, and ZIP Code						
	Washington				DC	20013-0760	
	<b> y</b>						
	I certify that I have exa	mined this Statem	nent and to	the best of	my knowledge a	and belief it is true, correct and complete.	
Sig	nature of Candidate					Date	
Lee	e, Mike, , ,			CEL		04/05/2021	
				[Eleci	tronically Filed]	, 0.,00,2021	
NO.	TE: Submission of false erroneous	or incomplete inf	ormation m	nav subject t	L i i	ng this Obstantanta nanaking of 211.0.0. \$427a	
	IL. Oubillission of laise, enoneous	, or incomplete in			ne person sianir	ng this Statement to penalties of 2 0.5.0. 9437d.	
	TE. Gubinission of faise, enoneous	, or incomplete init	1	iay oubject t	ne person signir	ng this Statement to penalties of 2 U.S.C. §437g.	
	TE. Odbinission of false, enouged	, or meomplete im		ay oubjoor t	ne person signir	ng this statement to penalties of 2 0.5.C. §43/g.	

FEC FORM 2 (REV. 02/2009)

FEC Form 2S (Revised 02/2017)

# Optional Supplemental Page for Designation of Additional Authorized Committees

Page \_\_\_2 **of** \_3\_\_\_

### **DESIGNATION OF OTHER AUTHORIZED COMMITTEES**(Including Joint Fundraising Representatives)

8.	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. <b>NOTE</b> : This designation should be filed with the principal campaign committee.					
	(a) Name of Committee (in full)					
	CORNYN VICTORY COMMITTEE					
	(b) Address (number and street) PO BOX 13026					
	(c) City, State, and ZIP Code					
	AUSTIN	NC	78711			
8.	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. <b>NOTE</b> : This designation should be filed with the principal campaign committee.					
	(a) Name of Committee (in full)					
	Mike Lee Victory Fund					
	(b) Address (number and street) PO Box 183					
	(c) City, State, and ZIP Code					
	Hudson	WI	54016-0183			
8.	I hereby authorize the following named committee, which is NOT my princip candidacy. NOTE: This designation should be filed with the principal camp  (a) Name of Committee (in full)  Red Victory 2022  (b) Address (number and street)					
	PO Box 183					
	(c) City, State, and ZIP Code					
	Hudson	WI	54016			
8.	hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my andidacy. <b>NOTE</b> : This designation should be filed with the principal campaign committee.					
	(a) Name of Committee (in full)					
	Gimenez Lee Victory					
	(b) Address (number and street) PO Box 183					
	(c) City, State, and ZIP Code					
	Hudson	WI	54016			

FEC Form 2S (Revised 02/2017)

# Optional Supplemental Page for Designation of Additional Authorized Committees

Page 3	of	3
--------	----	---

**DESIGNATION OF OTHER AUTHORIZED COMMITTEES** 

	(Including Joint Fundraising Representatives)					
3.	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. <b>NOTE</b> : This designation should be filed with the principal campaign committee.					
	(a) Name of Committee (in full)					
	2021 Senators Classic Committee					
	(b) Address (number and street) 228 S. Washington Street, Suite 11					
	(c) City, State, and ZIP Code					
	Alexandria VA 22314					
3.	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. <b>NOTE</b> : This designation should be filed with the principal campaign committee.					
	(a) Name of Committee (in full)					
	(b) Address (number and street)					
	(c) City, State, and ZIP Code					
3.	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. <b>NOTE</b> : This designation should be filed with the principal campaign committee.					
	(a) Name of Committee (in full)					
	(b) Address (number and street)					
	(c) City, State, and ZIP Code					
3.	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my					
	candidacy. <b>NOTE</b> : This designation should be filed with the principal campaign committee.					
	(a) Name of Committee (in full)					
	(b) Address (number and street)					
	(c) City State, and ZIP Code					